



Western Blind Rehabilitation Center

WBRC Review



FY 2014

Inside This Issue

The 'WBRC Review' is a Fiscal Year (FY) review of the Western Blind Rehabilitation Center (WBRC) for stakeholders including former and current students, prospective students, family and caregivers, VA staff and volunteers, and anyone interested in learning about low vision and blind rehabilitation services available to Veterans and Active Duty Service Members through the VA Palo Alto Health Care System.

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On the Cover: Top Left Photo—The new home of the WBRC (B-500) as seen from the front during construction in 2014. Center Photo—Progress of the B-500 interior courtyard area, which will be shared by WBRC and Polytruma, as of February 2015.

What is the WBRC?

The Western Blind Rehabilitation Center (WBRC) is a 27-bed residential facility located at the Menlo Park Division of the VA Palo Alto Health Care System. Approximately two hundred men and women of all ages participate in the program each year. More than three quarters have usable vision for which specialized treatment is provided. Adjusting to and managing visual impairment is the major objective of the program.



WBRC's current building (T-365) on the VAPAHCS Menlo Park Campus

WBRC Mission Statement:

The Western Blind Rehabilitation Center serves Veterans and Active Duty Service Members with vision impairment through a comprehensive evidence-based rehabilitation program that promotes independence and community reintegration through excellence in clinical care, education, and research as integral components of the Blind Rehabilitation Services Continuum of Care.

WBRC Application Process:

Application to the WBRC is made through the Visual Impairment Services Team (VIST) Coordinator. If you, or someone you know, has a visual impairment, please contact the Visual Impairment Services Team Coordinator at the nearest VA Health Care Facility. The Visual Impairment Service Team Coordinator at the VA Palo Alto Health Care System can be reached at **(650) 493-5000**, extension **64992**.

For information about other aspects of the program, please contact **(650) 614-9952**. If you are in the area and are interested in visiting the center for a tour and to learn more about the WBRC program, please call **(650) 614-9952** to make arrangements.

To learn more about Blind Rehabilitation Services available through the VA Palo Alto Health Care System please visit the following websites:

<http://www.paloalto.va.gov/vist.asp>

www.paloalto.va.gov/services/wbrc.asp

Director's Perspective: 2014 Year in Review

It is a pleasure to share the annual issue of the WBRC Newsletter for Fiscal Year (FY) 2014 with you! I invite you to join us in looking back over the past year at the highlights of the WBRC program. We look forward to building on these successes in the years to come.

The staff, management and leadership of Blind Rehabilitation Services strive to promote the respect, awareness and acceptance of all patients served at the WBRC. Treatment team members develop individualized programs that are effective, meaningful and meet the identified needs of a diverse population. The WBRC values the input of all stakeholders and incorporates their feedback towards program development and continuous quality improvement. In FY 2014, WBRC Patient Satisfaction scores revealed that 100% of patients stated that their goals were met, 100% of patients stated they would recommend the program to others and 100% of patients stated that services enabled them to do things better.

The Access to Care Initiative: The Right Care. The Right Time. Right Now., launched in 2012, continued as a strategic initiative in 2014 to ensure that all eligible patients who require blind rehabilitation training, have the opportunity to participate in WBRC programs in a timely manner. The concentrated effort by staff to streamline programs and improve the acceptance/admission process has significantly reduced wait times. The wait list reduced from an average time of 209 days (in 2012) to 27 days (current)! This is a remarkable accomplishment that emphasizes our commitment for timely admissions.

In FY 2014, 100% of Blind Rehabilitation Specialists were cross-trained in the iProgram which provides the WBRC Admissions Review Team additional resources and flexibility with scheduling admissions. The goal of the iProgram is to enhance the satisfaction, effectiveness, and efficiency of patients using mobile smartphone or tablet computers (iPhone / iPad) by providing basic training using built-in accessibility programs as an aid. An additional component of the program is a Technology Lab which covers advanced skills outside the basic skills parameters. Since 2013, over 100 Veterans have been served by the iProgram.

To reduce fall risk, WBRC Recreation Therapy, Orientation and Mobility (O&M) and Nursing Services collaborated on fall prevention for bowling which included ordering various stability devices such as the hemi-walker and quad canes. Tai Chi was added

2014 Year in Review (Continued)

to Recreation Therapy Programming in FY 2014 to assist in improving balance for people with visual impairment, which in turn can assist with fall reduction. Nursing Services and O&M Specialists collaborated on evaluation of a special 'Reacher' as a prosthetic; as often falls involve reaching for items. The result of the added initiatives implemented by the WBRC reduced the number of falls by almost 50%.

Another WBRC strategic initiative in FY 2014 was to provide outreach opportunities that combine advocacy, awareness and training on various topics important to the visually impaired population served by the Veterans Affairs Palo Alto Health Care System (VAPAHCS). Blind Rehabilitation Services partnered with the Office of Operations, Security and Preparedness (OSP) to develop an informative poster on how to assist as a human guide for a person who is visually impaired, especially in an emergency. In addition to the flyer, the WBRC provided human guide training to various VAPAHCS Services throughout the year.

In 2014, Commission on Accreditation of Rehabilitation Facilities (CARF) International awarded the WBRC a 3-year accreditation for comprehensive Blind Rehabilitation Services, for the fifth consecutive survey. This is the highest level of certification that can be awarded to an organization. With motivated employees and innovation, it is a great time for Blind Rehabilitation Services. As we continue serving visually impaired Veterans and Active Duty Service Members, please be assured that we will remain committed to maintaining the highest level of customer service, integrity and efficiency possible. We will always be striving to improve our services to Veterans, Active Duty Service Members, and their families.

I thank you with great sincerity for all you have done for this nation.

Sincerely,

Nicole L. Sandlan

Nicole L. Sandlan, CLVT
Service Chief for Blind Rehabilitation Services
Veterans Affairs Palo Alto Health Care System



FY 2014 WBRC Statistics

PROGRAMS SERVED

Regular	48
Computer	46
Dual	16
iProgram	61
CNVR	22
GPS	4
Power Mobility	12
Two Week	4
TOTAL	213

EYE CONDITION

ARMD	68
Glaucoma	47
Diabetic Retinopathy	21
Optic Atrophy	15
Retinitis Pigmentosa	15
Trauma	14
Stroke	4
Other	29

AVERAGE LENGTH OF STAY

Regular	39 Days
Computer	28 Days
Dual	43 Days
iProgram	21 Days
CNVR	42 Days
GPS	23 Days
Power Mobility	25 Days
Two Week	14 Days

**AVERAGE
LENGTH OF STAY** 29 Days

POINT OF SERVICE

World War II	36
Pre-Korean	2
Korean	28
Post-Korean	18
Vietnam	89
Post-Vietnam	28
Persian Gulf	11
OIF/OEF/OND	1

AGE

Teens: 1	60's: 66
20's: 1	70's: 31
30's: 4	80's: 60
40's: 5	90's: 16
50's: 29	

GENDER

Male	197
Female	16

FY 2014 Outcome Measures

The WBRC has developed clinically based functional assessments and innovative therapies for all disciplines in order to improve the effectiveness of treatment. The WBRC was the first VA Blind Center to produce outcome measures in all programs. Outcome measures are obtained using a variety of tools including 'pre' and 'post' training assessments and surveys. Outcome measures for FY 2014 included:

iProgram: 100% of participants reported improved levels of satisfaction for iPad and iPhone training and independent use of accessibility software as well as decreased perceived level of difficulty using their prescribed device after completing the program.

Orientation & Mobility: The majority of participants with low vision demonstrated increased ability to visually detect obstacles, overhangs, sidewalk risers, and step-down curbs from greater distances after training. Outcomes also show a reduction in falls for participants on ward after enhanced fall prevention measures and training.

Visual Skills: Before training, the majority of participants reported that they were dissatisfied with simple reading tasks and found them very difficult to complete. After training these same individuals reported that simple reading tasks were not difficult at all and that they were very satisfied with their ability to complete these tasks.

Manual Skills: Most participants reported improved ability and confidence in using tools and performing house-hold maintenance tasks. They also reported higher levels of independence and satisfaction in activities in which they had to use their hands.

Living Skills: The majority of participants reported increased confidence and overall satisfaction with their ability to maintain their personal appearance and to complete tasks including personal grooming and hygiene, clothing management, and eating skills. They also reported decreased perception of difficulty for meal preparation.

Computer Access Training: After completing comprehensive one-on-one training all Computer Access program participants reported increased confidence, enthusiasm, and skills needed to utilize a computer successfully at home and other environments.

Rehabilitative Nursing: All participants who learned to use the talking Voice Prodigy Glucose Monitor reported that it was 'easy to use' at the completion of training.

Satisfaction Survey Information: The WBRC's goal is to meet the individualized expectations of each participant and stakeholder. The WBRC uses a variety of measures to insure this including a post-program survey. Survey results include:

- **99%** of participants indicated that their goals were met.
- **99%** of participants stated they would recommend the program to others.
- **100%** stated that services enabled them to do things better.

Visit www.paloalto.va.gov/services/wbrc/outcome.asp for more FY 14 Outcomes.

B-500 Construction Updates



WBRC's future home (B-500) on the VAPAHCS Palo Alto campus as seen in February of 2014.

The Western Blind Rehabilitation Center has been proudly watching the construction of our new home (B-500). At the beginning of 2014 the structure was in place with a blue weather membrane applied to the exterior. By the end of 2014 the building had the siding and windows installed, interior wall structures installed, and even the beginnings of the courtyard water features and sculptures installed.

The new center will overlap the original WBRC footprint on the Palo Alto

VAPAHCS campus. At 174,000 square feet, this new facility is the largest consolidated rehabilitation center in the VA and will include 24 beds for the polytrauma program, 32 beds for the blind rehabilitation program, and 12 beds for the polytrauma transitional rehabilitation program. The center will also have an outpatient physical therapy/occupational therapy clinic, an outpatient physical medicine and rehabilitation clinic, and clinical programs for Operation Enduring Freedom/Operation Iraqi Freedom Veterans. This will be the VA's first and only Polytrauma Rehabilitation Center to be combined with a Blind Rehabilitation Center.

The VAPAHCS anticipates that B-500 construction will be complete in the summer of 2015 with the building becoming operational in the winter of 2015.

Keep up to date on B-500 Construction Progress at:



The exterior of B-500 as seen in December of 2014.

http://www.paloalto.va.gov/construction_poly.asp

WBRC Soars During 2014 CARF Survey

The VAPAHCS Blind Rehabilitation Service participated in a 2.5 day survey by the Commission on Accreditation of Rehabilitation Facilities (CARF) in August of 2014. CARF provides accreditation services worldwide at the request of health and human service providers. Through accreditation, CARF assists service providers in improving the quality of their services, demonstrating value, and meeting internationally recognized organizational and program standards. The accreditation process applies sets of standards to service areas and business practices during an on-site survey. Accreditation is an ongoing process, signaling to the public that a service provider is committed to continuously improving services, encouraging feedback, and serving the community. Accreditation also demonstrates a provider's commitment to enhance its performance and distinguish its service delivery.



The CARF representatives completed a thorough survey of our Blind Rehabilitation Services including a facility inspection, interviews with students and staff, examination of our scope of services, standards, memorandum and policies, review of inpatient and outpatient programming, outcome measures, quality of services provided, etc.

There were NO recommendations, WBRC is 100 % compliant with all standards.

The exit briefing consisted of outlining the many strengths they found in the program. Of note, the surveyors commented on:

- The high degree of satisfaction of the Veterans interviewed with the program.
- Concentrated efforts to provide outreach and increased access to care.
- Rehabilitation Nursing Services: Ability to provide patients with high acuity of care.
- Cutting edge innovations in every program including assistive technologies, the CNVR Program, the iProgram and the leadership in research.
- The continuous improvement culture and use of evidenced based best practices.
- Recreation Therapy community reintegration.
- The quality of the leadership.

Congratulations to the entire team for an exemplary survey!

WBRC Research

The WBRC has historically conducted clinical research on blindness and low vision. The focus is on clinical research relevant to visually impaired Veterans. The research program also seeks to bring innovative findings into the WBRC so that the clinical program maximally benefits from current developments in the field. Collaborative research both within and external to the VA leverages WBRC expertise as well as access to the Veteran population of the VA. Current collaborations include: Smith-Kettlewell Eye Research Institute, United States Army, VA/DoD Vision Center of Excellence, Stanford University, University of Southern California, Jasper Ridge, LLC (San Mateo, CA), VAPAHCS Optometry, and VAPAHCS Polytrauma System of Care.

Four of the FY 2014 WBRC Research Projects are:

Wearable Visual Aid as Treatment for TBI Associated Visual Dysfunction: The study is a joint project with James Weiland, Ph.D. (Doheny Eye Institute, USC) funded by the Department of Defense. The over-all goal of the project is the development of a wearable mobility aid for individuals with vision loss and traumatic brain injury.

Polytrauma Eye Research and Treatments Study (PERTS): Polytrauma injuries are a relatively new and very severe class of injuries to military personnel. The PERTS project is the only project of its kind to document the occurrence, and help assess the incidence of, visual impairment in this population. The results of the study have led to the development of a VA Central Office directive to implement comprehensive eye and vision examinations in all Polytrauma Rehabilitation Centers.

Assessing Factors Contributing to Reading Deficits in Special Populations: All levels of traumatic brain injury are associated with visual loss and/or dysfunction. This study seeks to elucidate the role of mild TBI in reading deficits with or without binocular/oculomotor dysfunction. The study is a collaborative effort between the WBRC and Drs. Lori Lott, John Brabyn, and Gunilla Hagerstrom-Portnoy of Smith-Kettlewell Eye Research Institute.

Characterization of Hands-Free Reading Aid for People with Low Vision: This project is a study of the VisionEdge lighting system and LuxIQ lighting assessment system on visual acuity and reading performance of individuals with low vision. WBRC has begun to implement this assessment tool to assess and prescribe lighting for Veterans participating in the WBRC's Rehabilitation Training Programs.

Written by Dr. Gregory Goodrich, WBRC Research Psychologist

Vision and the Brain

When most people think of vision they immediately consider the role of the eyes. However, we actually see with our brain, not our eyes. In fact, the eye's only job is to receive and focus light rays onto brain tissue in the back of the eye, also known as the retina. It is the brain that processes this information and makes sense of the light.

As many as 80% of neurons in the human brain respond to visual stimuli. The processing of vision is shared among the many parts of the brain. Just consider where the eyes are in relation to the occipital lobe in the back of the head. Vision travels throughout the brain to compute visual information. This is why any form of brain injury can cause vision dysfunction and the reason why vision is often impacted after a stroke or traumatic brain injury.



Normal vision compared to hemianopsia (right), a visual field loss which is caused by brain injury.

The implications of brain injury can include various vision complications such as difficulties with depth perception, reading, sensitivity to light (glare), inability to move the eyes in a coordinated manner, spatial orientation, recognition of objects or people, and visual field loss, among a host of other visual perceptual problems.

To learn more about vision and the role of the brain there are many resources available from books, on-line articles and television programs. Authors such as Oliver Sacks and Richard Gregory have published books on this topic. "Brain Games" is a television show on the National Geographic Channel which explains different aspects of brain functioning with each episode.

If you are a Veteran or know a Veteran that has experienced vision dysfunction due to brain injury there is help available. The Comprehensive Neurological Vision Rehabilitation (CNVR) program at the Western Blind Rehabilitation Center (WBRC) may be the right program to address these needs. Please contact your VIST Coordinator or call the WBRC at **(650) 614-9952** to learn more.

By John Kingston, WBRC Orientation & Mobility Department Supervisor

iProgram: Accessibility & Security

Technology is an area that can seem overwhelmingly daunting and ambiguous for many. The Veterans here at the WBRC each have an added stressor in the mix of accessing technology: Vision Loss. Over 60 Veterans completed iProgram training at WBRC in FY 2014. The iProgram assesses and trains Veterans with vision loss to use the accessibility options in Apple Software (iOS) which is built in to iPhones and iPads. For persons with some useable vision it is typical to use larger fonts, screen magnifying software and increased contrast options. For persons without usable vision it is common to use screen reading software which reads text aloud from the device. iPhones and iPads also have speech recognition software which includes Dictation and Siri and will translate what the user says into text.

WBRC's iProgram trains Veterans in a variety of areas including security. When working with a computing device, whether portable or not, it is crucial to understand the threats of security and privacy breaching. The first step of lowering security risk is awareness. Personal devices can contain a variety of data that you don't want shared including: email, phone numbers, and banking information. Keep your iPhone/iPad secure and private with a few simple tasks:

- **USE A PASSCODE** - All iPhones and iPads have the ability to include a 4-digit code to unlock your device. For all passcodes and passwords, keep them to yourself; you should limit sharing password information to only those you trust (no more than 2 people) and only as necessary.
- Use only secure internet Networks that require a password to connect.
- Use encryption for emails: SSL (Secure Sockets Layer). This is a default setting that encrypts data sent via the internet—if for some reason, you've disabled it: go into Settings>>Mail, Contacts, Calendars>>(Select email account)>> Account>>Advanced, and check that "Use SSL" is toggled "on".
- Turn on "Private Browsing" in Safari and "Do Not Track" in Settings. Both of these settings are designed to avoid advertisements and marketing catered to the user.

It is important, especially as an iPhone/iPad user who has vision loss, to be aware of the potential for privacy breaching. If you follow the above recommendations you will greatly increase your iPhone/iPad iOS device security and privacy.

By Elizabeth Alcorn, WBRC Acting Technology Coordinator

New Relaxation Group Offered at WBRC

Stress is a part of everyday life and can be positive or negative. It can come from a variety of sources, such as our body, environment, and/or thoughts. Adjusting to vision loss and learning new adaptive skills and devices in itself can be quite stressful. Veterans at the WBRC have expressed a need to not only concentrate on training, but to also have an opportunity to focus inward and learn to better manage stress from a mind-body perspective.

As a part of the WBRC's empowering and holistic approach, we are now offering a weekly relaxation group facilitated by WBRC's Psychology, Recreation Therapy, and Social Work departments. In each session a different type of relaxation exercise is introduced to the participants, practiced, and then discussed. These can vary from breathing techniques and stretching exercises to guided imagery and different styles of muscle relaxation. The goal is to learn methods of relaxation that speak to different individuals' personal preference and style, and which can hopefully be incorporated into the Veteran's daily routine.

There are many benefits to regularly applying relaxation exercises and taking the time to focus on one's physical, mental, and emotional needs and well being such as reducing pain, releasing tension, increasing circulation and oxygen supply, lowering blood pressure, allowing pleasant sensations and thoughts to surface, managing troubling experiences, and improving sleep.

The biggest challenge may be for us to take time out of our busy days to deliberately engage in relaxation. Effective relaxation takes time and practice, and the more we allow ourselves to get into a state of true relaxation, the easier it is to return to that feeling when faced with challenges and stressful events.

By Dr. Laura Peters, WBRC Psychologist & Simone Riente, WBRC Social Worker

Wondering About VIST Activities in Your Area?

Please contact your local VIST Coordinator for more information about meetings, events, and blind rehabilitation services.



Call [202-461-7317](tel:202-461-7317) to learn how to contact a VIST in your home area.

Dog Guides and the WBRC



'Rookie', a Guide Dog Puppy in Training is currently being raised by Lindsay Hass, WBRC Orientation and Mobility Instructor.

It is a common occurrence at the WBRC to see dogs; specifically dog guides. The WBRC has staff members as well as Veterans who utilize a dog guide to aid their mobility and there is currently a Guide Dogs for the Blind (GDB) Puppy in Training on ward, too.

If a Veteran is thinking about getting a dog guide, it is best for them to discuss the process with their Orientation and Mobility (O&M) instructor. The O&M instructor can provide information on the dog guide schools in the United States as well as help fill out required forms regarding the O&M training a Veteran received while attending the WBRC. They can also educate students about dog guides as well as provide a 'Juno' walk which is a simulation of what walking with a dog guide feels like.

The choice to become a dog guide user

is an extremely personal one. There are huge differences between using a long cane and using a dog guide. For instance, when using a long cane the user can make contact with obstacles in the travel environment and the cane can provide information about that obstacle, however, when using a dog guide the dog avoids the obstacle completely – guiding it's handler around it. Long canes can be folded up and/or put away when not in use. Dog guides require daily care including feeding, grooming, and relieving but also provide companionship.

There are many misconceptions about dog guides as well. Many people remark that the dog replaces the need for Orientation and Mobility (O&M) skills. This is actually not the case and all dog guide schools expect students to have good primary O&M skills before coming and often request O&M instructors to provide documentation of O&M training prior to admission. Another common misconception is that the dog

Dog Guides and the WBRC (Continued)

guide determines the proper time to cross the street. The handler actually determines the proper time to cross the street and cues the dog to start crossing. Dog guides are taught 'intelligent disobedience' and will stop their handler from stepping out in front of an oncoming car by refusing to move forward when commanded.

It's important to understand proper etiquette when encountering a working dog guide team. As tempting as it may be to pet a dog guide, remember that the dog is working and is responsible for leading someone who has low or no vision. Reaching for or speaking to a dog guide can be very distracting and the handler's safety may depend on their dog's alertness and concentration. Always ask the handler before petting.

If you are a Veteran and do decide to get a dog guide, make sure that you contact your VIST Coordinator before attending training for your dog guide because often dog guides can be entered into your medical record as a prosthetic. There are certain steps that need to occur in order to get your dog guide entered into your record as a prosthetic and there are some restrictions associated with adding a dog guide as a prosthetic, so please speak with your VIST Coordinator if you have any questions. By adding your dog guide as a prosthetic, the VA can help cover certain costs associated with caring for your dog guide, primarily veterinary expenses.

If you are or become a dog guide user and decide to bring it to the WBRC during an admission you will be expected to abide by certain policies such as to relive your dog guide on leash and to independently clean up after and care for your dog guide while you are admitted to the program. WBRC's O&M instructors can help orient a dog guide user to the WBRC however are not qualified to offer any training advice relating to your dog guide. Dog guide users are encouraged to contact the school where their dog guide was issued if they need advice or have any issues; the school that the dog guide was trained by is usually happy to help via phone or even in person.

There are a total of three dog guide schools in California and they are; Guide Dogs of the Desert, Guide Dogs for the Blind, and Guide Dogs of America. If you have been thinking about getting a dog guide it is important to do your research beforehand as all guide dog schools have something different to offer. The decision to pursue use of a dog guide is extremely personal —be sure to weigh the pros and cons and make the best decision for yourself.

By Lindsay Hass, WBRC Orientation & Mobility Instructor

WBRC Overnight Recreation Therapy Trips

The WBRC Recreation Therapy Department partnered with Environmental Traveling Companions (ETC) to provide Veterans at the Blind Center the opportunity to attend two overnight recreation therapy trips in 2014; the second annual overnight kayak trip to Angel Island and for the first time a two night white water rafting trip down the American river. These outdoor adventure trips focused on improving self-confidence, community integration, self-esteem, as well as fitness and wellness.



A WBRC Veteran observes the group during the WBRC overnight white water rafting ETC trip on the American River.

All the Veterans on these trips reported being very satisfied with what ETC provided from the campsite, to the staff, to the food. For the white water rafting trip the group spent the night resting under the stars then were oriented to the rafts and embarked on a 12 mile journey down the American River. Before this experience many of the Veterans who went on the trip could not fathom how individuals with visual impairments could navigate the American River and all of the rapids it had to offer. This amazing trip provided the Veterans with a new sense of self-confidence and pride.

Currently the WBRC Recreation Therapy program partners with a number of community programs such as ETC, the Riekes Center, and the Bay Area Outreach and Recreation program. These partnerships assist the WBRC Recreation Therapy program in providing Veterans unique rehabilitative opportunities that improve quality of life through improving fitness, socialization, and self-confidence in the community and in activities.

The WBRC Recreation Therapy department encourages you to stay open minded to every possibility. Where there is a will there is a way. We cannot wait to hear about your exciting endeavors in life! We hope that you continue to challenge yourself with new life experiences as you re-integrate back into your community.

By Rachel Smith & Lindsay Conner, WBRC Recreation Therapists

WBRC's My HealtheVet Initiative

WBRC's nursing staff launched an initiative to ensure that all Veterans admitted to the center are informed about My HealtheVet. My HealtheVet is the VA's online personal health record designed for Veterans, Active Duty Service Members, their dependents and caregivers. The service is free of cost and provides tools and opportunities for users to make informed decisions and manage their health care.

Features in My HealtheVet are available based on account type. All users who have a Basic account are able to view their self-entered information. VA patients can upgrade their account to Advanced or Premium. Premium account features include VA Notes which are clinical notes that the health care team records during appointments or hospital stays. Other features are:

- Make VA Appointments
- Access Detailed Lab Reports
- Manage and Refill VA Prescriptions
- View VA Admissions and Discharges
- View VA Immunization Records
- View VA Vitals and Readings
- View VA Wellness Reminders



My Healthe Vet logo. More information is available at www.myhealth.va.gov

The WBRC My HealtheVet initiative began with an all-staff training by the

My HealtheVet coordinator including education about the system and program benefits. The WBRC nursing staff then began to educate all Veterans admitting to the WBRC about My HealtheVet services and encourage enrollment in the program and to include My HealtheVet information in the printed discharge packets provided upon completion of their program.

My HealtheVet training is now offered to Veterans enrolled in the WBRC Computer Access Training and iPrograms. The My HealtheVet website is accessible using adaptive software such as VoiceOver and JAWS. WBRC technology instructors often collaborate with interested Veterans to enroll in the program.

More information about My HealtheVet is available on-line at www.myhealth.va.gov.

By Jean Mary-Barry, WBRC Clinical Nurse Leader

How to Talk to Your Eye Doctor

Establishing a partnership with your eye doctor will help you to achieve your best possible level of eye health and hopefully maintain your best possible level of vision. In order to develop a good doctor-patient relationship you will need mutual trust, respect and good communication. Here are some questions you can ask your doctor to establish good communication:

About My Disease or Disorder...

- What is my diagnosis?
- What caused my condition?
- Can my condition be treated?
- How will this condition affect my vision now and in the future?
- Should I watch for any particular symptoms and notify you if they occur?
- Should I make any lifestyle changes?

About My Treatment...

- What is the treatment for my condition?
- When will the treatment start, and how long will it last?
- What are the benefits of this treatment, and how successful is it?
- What are the risks and side effects associated with this treatment?
- Are there foods, drugs, or activities I should avoid while I'm on this treatment?
- If my treatment includes taking a medication, what should I do if I miss a dose?
- Are other treatments available?

Full understanding of what your eye doctor tells you is key to good communication. If you don't understand your doctor's responses, ask questions until you do understand. It may help to take notes, or get a friend or family member to take notes for you. If you still have trouble understanding your doctor's answers, ask for printed material on your condition or where you can go for more information. Full understanding will help you commit to your doctor's recommendations and ultimately lead you to the best eye care. Visit www.nei.nih.gov/health/talktodoc for more suggestions.

By Dr. Shanida Ingalla, WBRC O.D.

WBRC's New Faces

Lindsay Hass joined the WBRC as an Orientation and Mobility (O&M) Instructor in October 2013. Ms. Hass completed her Master's degree in Special Education with emphasis in Guide Dog Mobility and O&M at San Francisco State University in 2010. Ms. Hass completed her Graduate Level O&M internship at the WBRC in 2010 and is accredited by ACVREP as a O&M Specialist. Ms. Hass previously worked for the San Diego Center for the Blind and Vision Impaired, where she served as an O&M Specialist. She also participates in the Guide Dogs for the Blind puppy raising program and is currently raising Rookie, a male 3/4 yellow lab 1/4 golden retriever, who is her 6th guide dog puppy.

Annalise Shaffer joined the WBRC as a Manual Skills Instructor in January 2014. Ms. Shaffer earned a Master's Degree in Vision Rehabilitation Therapy at Western Michigan University in 2013. She is accredited by ACVREP as a Vision Rehabilitation Therapist and interned at Edward Hines Jr. Hospital in Chicago.

Roschild Grullon joined the WBRC as the Nurse Manager in September 2014. Ms. Grullon is a registered nurse with a Master's Degree in Public Health Administration from New York University. She previously worked at New York Presbyterian/Columbia University Medical Center and has practiced in cardiology, OB and behavioral health.

Charity Son joined the WBRC as a Visual Skills instructor in August 2014. Ms. Son graduated from the Northern Illinois University Special Education Master's program in 2013. She interned at the VA Central Blind Rehabilitation Center from 2012 to 2013 and is accredited by ACVREP as a Vision Rehabilitation Therapist. She previously worked at the Alaska Center for the Blind and Visually Impaired providing low vision, daily living skills and O&M instruction as a Rural Outreach Coordinator.

Glenda Buscarello joined the WBRC as the Computer Access Training Department Supervisor in December 2014. Mrs. Buscarello is a graduate of San Francisco State University where she obtained degrees as a Teacher of the Visually Impaired and in O&M. She is accredited by ACVREP as a Low Vision Therapist, Teacher of the Visually Impaired and an O&M Specialist. She is also a Veteran who retired from the United States Air Force Reserve in 2006 after 21 years of service. She previously worked for the University of Colorado, Boulder as the Disability Access Coordinator and has also taught college courses covering a variety of computer equipment & software including JAWS, ZoomText and iPad/iPhone.

Stay Up-to-Date with the WBRC

The Western Blind Rehabilitation Center (WBRC) has many ways for alumni, prospective students, family members, care-givers, and other WBRC stakeholders to stay up-to-date with us. The annual fiscal year 'Review' is mailed to WBRC students who attended in that fiscal year and is available to all stakeholders on-line. WBRC also has a Website, Blog, Facebook Page, and an Alumni E-mail Group.

WBRC Website (www.paloalto.va.gov/services/wbrc.asp):

This comprehensive website describes the WBRC's programs & services as well as provides information regarding admissions, program setting, outcome measures, and treatment area descriptions. It also provides resources such as VIST Coordinator contact information, educational material for assisting people with vision loss, and links to the WBRC blog, annual review, and construction updates.

WBRC Blog (www.westernblind.blogspot.com):

An online 'journal' of sorts, the WBRC Blog posts articles several times per month regarding a wide range of topics including WBRC events, construction updates, new developments, and community resources. The blog also provides links to a variety of resources including VA and community blind rehabilitation services.

WBRC Facebook Page (<http://www.facebook.com/?ref=logo#!/pages/Western-Blind-Rehabilitation-Center/197110680310851>):

'Like' us on Facebook and get automatic WBRC updates on your Facebook account.

WBRC Alumni E-Mail Group:

Are you a WBRC Alumni that wants to stay in touch with other WBRC Alums and keep up with WBRC news? Join the WBRC Alumni e-mail group at Yahoo.com and start receiving e-mail postings right to your e-mail inbox. Simply e-mail your request to:

wbrc-alumni-subscribe@yahoogroups.com

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